

Declaration and Power of Attorney for Patent Application

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am an original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled Device for Mounting an Optical Element, for Example a Lens Element in a Lens

(Attorney Docket No. L026-002), the specification of which

(check [X] is attached hereto.
one)

[] was filed, with my authority, on _____
as Application Serial No. _____
and was amended on _____
(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

And I hereby appoint DAVID P. ROBERTS, Reg. No. 23,032; RANDY A. GREGORY, Reg. No. 30,386; JAMES L. PRICE, Reg. No. 27,376; MARK S. MATKIN, Reg. No. 32,268; DEEPAK MALHOTRA, Reg. No. 33,560; MARK W. HENDRICKSEN, Reg. No. 32,356; DAVID G. LATWESSEN, Reg. No. 38,533; GEORGE G. GRIGEL, Reg. No. 31,166; KEITH D. GRZELAK, Reg. No. 37,144; JAMES D. SHAURETTE, Reg. No. 39,833; FREDERICK M. FLIEGEL, Reg. No. 36,138; DONALD B. KENADY, Reg. No. 40,045; JAMES E. LAKE, Reg. No. 44,854; and BERNARD BERMAN, Reg. No. 37,279; all of Wells, St. John, Roberts, Gregory & Matkin, P.S.; 601 West First Avenue, Suite 1300, Spokane, Washington 99201-3828, Telephone (509) 624-4276, and each or any of them, my attorneys or agents, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

ADDRESS ALL COMMUNICATIONS IN OR PERTAINING TO THIS APPLICATION TO:

George G. Grigel
WELLS, ST. JOHN, ROBERTS,
GREGORY & MATKIN, P.S.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

U.S. Provisional Application(s)

U.S. Patent Application(s)

[illegible]

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

The undersigned to this Declaration and Power of Attorney hereby authorizes the U.S. attorneys named herein to accept and follow instructions from Lorenz & Kollegen,
Fasanenstrasse 7, D-89522 Heidenheim, Germany

[Firm Name and Address]

as to any actions to be taken in the U.S. Patent and Trademark Office regarding this application without direct communication between the U.S. attorneys and the undersigned. In the event of a change in the persons from whom instructions may be taken, the U.S. attorneys will be so notified by the undersigned.

Full name of sole or first joint inventor Dr. Karlfrid Osterried

Inventor's signature _____

Date

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Citizenship German

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Full name of second joint inventor, if any _____

Second Inventor's signature _____

Date

Residence _____

Citizenship _____

Post Office Address _____

Full name of third joint inventor, if any _____

Third Inventor's signature _____

Date

Residence _____

Full name of fourth joint inventor, if any _____

Fourth Inventor's signature _____

Date

Residence _____

Citizenship _____

Post Office Address _____

Full name of fifth joint inventor, if any _____

Fifth Inventor's signature _____

Date

Residence _____

Citizenship _____

Post Office Address _____

Full name of sixth joint inventor, if any _____

Sixth Inventor's signature _____

Date

Residence _____

Citizenship _____

Post Office Address _____